

# MEMBERSHIP FORM

Name \_\_\_\_\_ Date \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

Prov./State \_\_\_\_\_ Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Tel. ( ) \_\_\_\_\_ Email \_\_\_\_\_

Enclosed a cheque of \$ \_\_\_\_\_ payable to:

**ASSOCIATION DES FAMILLES PERRON D'AMÉRIQUE**

**MEMBER (PLEASE INDICATE YOUR CHOICE)**

\_\_\_\_\_ Regular:      \$20 for 1 year; \$55 for 3 years – in Canada  
                             \$25 for 1 year; \$70 for 3 years – other than Canada

\_\_\_\_\_ Benefactor:    \$40 and more

Amounts are in Canadian currency

I am a descendant of:

\_\_\_\_\_ Daniel Perron dit Suire

\_\_\_\_\_ Joseph Dugrenier dit Perron

\_\_\_\_\_ Jacques Desnoyers dit Lajeunesse

\_\_\_\_\_ Unknown

Please send your request along with a cheque to the following address:

**ASSOCIATION DES FAMILLES PERRON D'AMÉRIQUE**  
C.P. 10090 Succ. Sainte-Foy  
Québec, QC Canada  
G1V 4C6